Change in Company's premiurevision effective 03/01/2		by rate
(1)	(2)	(3)
(4)	Annual Premium	Percent
Covera <u>ge</u>	Volume (Illinois) *	Change (+ or -)**
 Automobile Liability 		
Private Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
Liability Other Than Auto	\$293,939	-9.9%
	2004 Earned Premium	
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: NA	territory (territories)or	certain classes?
Brief description of filing. (If organization, specify organization# GL-2005-BGL1 on 03/01/2006.	filing follows rates of ann): Adoption of ISO Refer	nn advisory rence Filing
# OH 2003 BOH2 OH 05, 01, D0001	<u> </u>	
		OF INCHEANCE
* Adjusted to reflect all prior : ** Change in Company's premium lev	rate changes. vel which will	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED
result from application of new		SEP 3 0 2005
74.	merican Alternative Insura	SORINGFIELD. ILLINOIS
A	Name of Compa	the application,
	маше от сощра:	1. 9y

Stephen J. Corbett - Vice President
Official - Title

H29219D

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

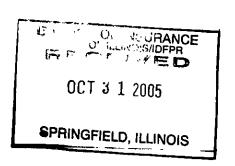
Change in Company's premium or rate level produced by rate revision effective		11/01/2005	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
2. Automobile Physical Damage			
Private Passenger Commercial 3. Liability Other Than Auto	4,124,640	-12.3%	
4. Burglary and Theft	4,124,040		
5. Fidelity	· · · · · · · · · · · · · · · · · · ·		
7 Cumaha			
B. Boiler and Machinery			
9. Fire			
Extended Coverage	·		
1. Inland Marine			
2. Homeowners			
4. Crop Hail			
15. Other Line of Insurance			
Line of Histiance			
Does filing only apply to certain territory (terri	itories) or certain classes? If so, specify		
filing only applies to Accountants in the Prer			
Brief description of filing. (If filing follows rate Please, see attached explanatory memo.	s of an advisory organization, specify o		
Adjusted to reflect all prior rate changes.			
*Change in Company's premium level which	will result from application of new rates	S.	
	Contine	ntal Casualty Company	
		Name of Company	
	John Lockhart,	Regulatory Filings Technician	
		Official - Title	
•			

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR
OCT 18 2005

SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced	duced by rate revision effective	12/01/05
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		<u></u>
Private Passenger Commercial		
3. Liability Other Than Auto	1,394,997	0.0%
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (territoric	es) or certain classes? If so, specify:	Yes, OL&T Class 49185 Only - All
		Territories
Brief description of filing. (If filing follows rates o	f an advisory organization, specify orga	nization): ISO
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which wil	I result from application of new rates.	
	Employ	ers Mutual Casualty Company
		Name of Company
		· ·
		Don Coughennower - Assistant Vice President
	· · · · · · · · · · · · · · · · · · ·	Official - Title



(1) Coverage Annual Premium Yolume (Illinois)* 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify constitution in a coveral impact of the above previously deferred ISO filings Amend Loss Cost Multipler for Auto dismartling to 1.700. Amend the policy minimum premium for both prepaid polices and annual premium payment planes at \$400 SPRINGFIELD, ILLINOIS introduce *ad* rates for class codes 10073, 16616 and 91190. Sherry Walter State Filling Analyst Official - Tritle	Onung	c in company's premium of fate level pro	oduced by rate revision effective	NB & RNLS Effective 2-1-06
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filling. (If filling follows rates of an advisory organization, specify program the filling follows rates of an advisory organization, specify program the filling follows rates of an advisory organization of the filling follows rates of an advisory organization of filling. (If filling follows rates of an advisory organization, specify program the filling follows rates of an advisory organization of filling. (If filling follows rates of an advisory organization organization organization of the filling follows rates of an advisory organization organ			Annual Premium	Percent
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Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto S91,976 -2.2% 4. Burglary and Theft 5. Glass 6. Fidehity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization in an overall impact of 22%. Adopted the above previously deferred ISO filings Amend Loss Cost Multiplier for Auto dismarifing to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans in \$400 SPRINGFIELD, ILLINOIS Amend the policy minimum premium for both prepaid policies and annual premium payment plans in \$400 SPRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS Sherry Walter State Filing Analyst	Į.			
2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto S91,976 2.2% 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization of filing. (If filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organization of filing follows rates of an advisory organization, specify organ		-		
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Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify pages for the solution of	۷.			
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filting only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization, specify organization in an overall impact of 22%. > Adopted the above previously deferred ISO filings > Amend Loss Cost Multiplier for Auto dismartling to 1.700. > Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPRINGFIELD, ILLINOIS > Introduce 'aa' rates for class codes 10073, 18616 and 91190. Sherry Walter State Filing Analyst		_		
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filting only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filting follows rates of an advisory organization, specify organization in the following rate revisions to apply to our Commercial Property Program. The filter in the property Program. Adopted the above previously deferred ISO filings > Adopted the above previously deferred ISO filings > Amend Loss Cost Multiplier for Auto dismantling to 1.700. > Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPHINGFIELD, ILLUNOIS Introduce 'aa' rates for class codes 10073, 18616 and 91190. Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst	3.		\$01.076	2.20/
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization and have no overall impact of 22%. With this filing it is our intent to submit the following rate revisions to apply to our Commercial Property Problem. The property of 9 2005 Adopted the above previously deferred ISO filings Anend Loss Cost Multiplier for Auto dismanding to 1.700. Anend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPRINGFIELD. ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst	-			-2.270
6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization of filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This office with an overall impact of 22%. > Adopted the above previously deferred ISO filings > Amend Loss Cost Multiplier for Auto dismantling to 1.700. > Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPRINGFIELD. ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst		- ·		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filling. (If filling follows rates of an advisory organization, specify organization in an overall impact of 22%. With this filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. The other in an overall impact of 22%. > Adopted the above previously deferred ISO filings > Amend Loss Cost Multiplier for Auto dismantling to 1.700. > Amend the policy minimum premium for both prepaid policies and annual premium payment plans in \$400 > Introduce "aa" rates for class codes 10073, 16616 and 91190. Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst		-		
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization in the following rate revisions to apply to our Commercial Property Program. This filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This filing is in the overell impact of 22%. > Adopted the above previously deferred ISO filings > Amend Loss Cost Multiplier for Auto dismantling to 1.700. > Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPRINGFIELD, ILLINOIS Harleysville Insurance Company Name of Company Name of Company		-		
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organizati				
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization, spec	9.	•		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization, spec	10.	Extended Coverage		
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization of filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This Plays are the filing in the non-verall impact of 22%. Adopted the above previously deferred ISO filings Amend Loss Cost Multiplier for Auto dismantling to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 SPRINGFIELD, ILLINOIS Introduce 'aa' rates for class codes 10073, 18616 and 91190. Sherry Walter State Filing Analyst	11.			
14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization	12.	Homeowners		•
Line of Insurance Does filting only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization,	13.	Commercial Multi-Peril		
Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization, s	14.	Crop Hail		
Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization). With this filing it is our intent to submit the following rate revisions to apply to our Commercial Property Program. This desire is an an overall impact of 2.2%. Adopted the above previously deferred ISO filings Amend Loss Cost Multiplier for Auto dismantling to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans to 400 SPRINGFIELD, ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst	15.	Other		
Adopted the above previously deferred ISO filings Amend Loss Cost Multiplier for Auto dismantling to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 PRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst	Brief	description of filing. (If filing follows r	ates of an advisory organization, spec	cify organization of the company of
Amend Loss Cost Multiplier for Auto dismantling to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 PRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst	With 1 2.2%	this filing it is our intent to submit the following rate revisi .	ions to apply to our Commercial Property Program.	This plant is an overall impact of -
Amend Loss Cost Multiplier for Auto dismantling to 1.700. Amend the policy minimum premium for both prepaid policies and annual premium payment plans to \$400 PRINGFIELD, ILLINOIS PRINGFIELD, ILLINOIS Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst		> Adopted the above previously deferred ISO fillings	s \	007 03 200
Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst		➤ Amend Loss Cost Multiplier for Auto dismantling t	to 1.700.	wors /
Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst		· ·	,	COM STELD, ILLINO.
Harleysville Insurance Company Name of Company Sherry Walter State Filing Analyst				SPRINGFILL
Name of Company Sherry Walter State Filing Analyst		Introduce "aa" rates for class codes 10073, 18616	6 and 91190.	
Name of Company Sherry Walter State Filing Analyst			He	urlevsville Insurance Company
State Filing Analyst				
Umciai - Title				State Filing Analyst
H29219D	H292	19D		Oniciai - Title



	c in company's promum of face level	produced by rate revision effective	NB & RNLS Effective 2-1-06
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
2	Commercial	## 227 22 <i>6</i>	
3. 4.	Liability Other Than Auto	\$7,227,225	+3.9%
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
With resu	this filing it is our intent to submit the foll thin an overall impact of +3.9%.	owing rate revisions to apply to our Comm	erday rue of NSUBANCE erday rue of nogrand (1973) change vill
			0
	> Adopted the above previously defer	Ted ISO filings	OCT 0 3 2005
	• •	red ISO filings n for both prepaid policies and annual pre	mium payment plans to \$400
	• •	n for both prepaid policies and annual pre	9-1
Attac	> Amend the policy minimum premiur	n for both prepaid policies and annual pre	mium payment plans to \$400
	 Amend the policy minimum premiur Introduce "aa" rates for class codes 	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration.	mium payment plans to \$400
At	 Amend the policy minimum premiur Introduce "aa" rates for class codes ched please find the revised manual page 	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005	mium payment plans to \$400
At With	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page ttached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, N (IL) CR-HE-2, Second Reprint, N	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005	mium payment plans to \$400 SPRINGFIELD, ILLINOIS
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual present 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 be applicable to all policies effective on	mium payment plans to \$400 SPRINGFIELD, ILLINOIS and after February 1, 2006.
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004	mium payment plans to \$400 SPRINGFIELD, ILLINOIS and after February 1, 2006.
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual present 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 be applicable to all policies effective on	mium payment plans to \$400 SPRINGFIELD, ILLINOIS and after February 1, 2006.
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 pe applicable to all policies effective on The duplicate letter may be used as an ap	mium payment plans to \$400 SPRINGFIELD, ILLINOIS and after February 1, 2006.
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 pe applicable to all policies effective on The duplicate letter may be used as an ap	SPRINGFIELD, ILLINOIS and after February 1, 2006. proval notice for our file.
At With <i>Rule</i>	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 pe applicable to all policies effective on The duplicate letter may be used as an ap	SPRINGFIELD, ILLINOIS and after February 1, 2006. proval notice for our file.
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 pe applicable to all policies effective on The duplicate letter may be used as an ap	and after February 1, 2006. proval notice for our file. reville Lake States Insurance Company Name of Company Sherry Walter
At With Rule	➤ Amend the policy minimum premium ➤ Introduce "aa" rates for class codes ched please find the revised manual page trached: (IL) CF-HE-1 and (IL) CF-HE-2, Idrawn: (IL) CR-HE-1, Second Reprint, For (IL) CR-HE-2, Second Reprint, Note of Application: These changes shall the content of the co	n for both prepaid policies and annual pre 10073 and 18616. es for your review and consideration. Third Reprint, February 2006 ebruary 2005 ovember 2004 pe applicable to all policies effective on The duplicate letter may be used as an ap	and after February 1, 2006. proval notice for our file. reville Lake States Insurance Company Name of Company

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level prod	uced by rate revision effective12/	01/05	
(1) Coverage	(2) Annual Premium Volume (Illinois)*	9	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial			
Automobile Physical Damage			
Private Passenger Commercial			
Liability Other Than Auto	5,418,172		0.0%
Burglary and Theft Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			···
10. Extended Coverage	· · · · · · · · · · · · · · · · · · ·		
11. Inland Marine			······································
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other		-	
Line of Insurance			
Does filing only apply to certain territory (territorie	s) or certain classes? If so, specify:	Yes, OL& Territories	T Class 49185 Only - All
Brief description of filing. (If filing follows rates of	an advisory organization, specify organiza	tion):	ISO
			
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will	Illinois Emo	asco Insurance C	ompany
	Na	ame of Company	
	0 Don	ı Coughennower	Assistant Vice President
		Official - Title	



Change in Company's	premium	or	rate	level	produced	bу	rate
revision effective	2/1/06						

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial	3,701,206	-7.0
3. Liability Other Than Auto4. Burglary and Theft5. Glass	3,701,200	
6. Fidelity7. Surety8. Boiler and Machinery		
9. Fire 10. Extended Coverage		
ll. Inland Marine 12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain If so, specify: No Brief description of filing. (If organization, specify organization)	filing follows rates of	an advisory
		L Dura
* Adjusted to reflect all prior ** Change in Company's premium le result from application of new	vel which will	
		oliance Manager
	Official - Ti	тте

Form (RF-3)

SUMMARY SHEET

Change	in	Company's	premium	or	rate	level	produced	by	rate
revisio	n	effective	1/1/06						

revision effective 1/1/06		•
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	<pre>Volume (Illinois)*</pre>	Change $(+ or -)**$
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto4. Burglary and Theft5. Glass6. Fidelity	541,721	+5.6%
7. Surety 8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
ll. Inland Marine		
12. Homeowners	· · · · · · · · · · · · · · · · · · ·	
13. Commercial Multi-Peril		
l4. Crop Hail l5. Other		
Line of Insurance		 .
nine or insurance		
Does filing only apply to certain If so, specify: Health and Fitnes		certain classes?
Brief description of filing. (If organization		
* Adjusted to reflect all prior r ** Change in Company's premium lev	el which will	
result from application of new	rates.	
reput from application of new DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR		
	niladelphia indemnity ins	
OCT 3 1 2005	Name of Compa	ny

Kevin W. O'Brien - Compliance Manager
Official - Title

H29219D

SPRINGFIELD, ILLINOIS

Change in Company's premium revision effective 01/01/0	n or rate level pro 6	duced by rate
(1)	(2)	(3)
	Annual Premium	
Coverage	Volume (Illinois	<u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto	2,128,	079 0
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage	·v.	
11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain	territory (territo:	ries)or certain classes?
If so, specify: no	<u>-</u>	
	. "	
Brief description of filing. (If	filing follows rat	es of an advisorv
organization, specify organization		
We are filing company loss cost mu	ltipliers and pack	age modifiers to go with the
current ISO loss costs.		DIVISION OF INSURANCE
		STATE OF ILLINOIS/IDEPR
* Adjusted to reflect all prior r	ate changes.	RECEIVED
** Change in Company's premium lev	el which will	OCT 0 7 2005
result from application of new	rates.	00101500
		Springfield, Illinois
	SECURA Insurance	A Mutual Company
		Company
	Robert Bauma	n - official
		l - Title



Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective 11/1/Q5

revision effective 11/1/05	·	•
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercia! 2. Automobile Physical Damage	,,,	
Private Passenger Commercial		
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass	247,532	- 9,9
6. Fidelity		
7. Surety 8. Boiler and Machinery		
9. Fire		
O. Extended Coverage		
1. Inland Marine	······································	
12. Homeowners		
3. Commercial Muiti-Peril		
14. Crop Hail		
.5. Other		
Line of Insurance		
	territory (territories) oz perations (subline Code 334) a Code 336) \$100,00/\$200,000 occ	nd Products/Completed
Brief description of filing. (If organization	filing follows rates of a Adoption of ISO filing, GL	an advisory 2005-BGL1,
Ilinois Revised General Liability Advisory I change indicated above is the overall effec- our loss cost multiplier.	Prospective Loss Costs To Bec t of change based on this adop	ome Effective.The -9.9 tion as we are not revising
* Adjusted to reflect all prior r		

INAISSUAND INSUITABLE COMPANY OF AMERICA, INC.
Name of Company
Marshall Felbein, Vice President -
Official - Title

0293190

IL 05279

^{**} Change in Company's premium level which will result from application of new rates.